

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number Q92604
		Confirmation Number 3752
Application Number	10/564,012	Filing Date August 11, 2006
For	COMPOSITIONS AND METHODS FOR STABLE ISOTOPE LABELLING OF BIOLOGICAL COMPOUNDS	
Art Unit	1651	Examiner Name Lora Elizabeth BARNHART
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130.00	\$65.00
<input checked="" type="checkbox"/> Two month (37 CFR 1.17(a)(2))	\$490.00	\$245.00
<input type="checkbox"/> Three month (37 CFR 1.17(a)(3))	\$1110.00	\$555.00
<input type="checkbox"/> Four month (37 CFR 1.17(a)(4))	\$1730.00	\$865.00
<input type="checkbox"/> Five month (37 CFR 1.17(a)(5))	\$2350.00	\$1175.00
<input checked="" type="checkbox"/> Previous Payment Amount	\$65.00	Date Submitted November 30, 2010
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input checked="" type="checkbox"/> Payment by credit card.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees, except for the Issue Fee and the Publication Fee , or credit any overpayment, to Deposit Account Number 19-4880.		
I am the	<input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 47,121 <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34	
WASHINGTON OFFICE 23373 CUSTOMER NUMBER		
<hr style="border-top: 1px solid black; margin-bottom: 2px;"/> /Keiko K. Takagi/ <hr style="border-top: 1px solid black; margin-bottom: 2px;"/> Signature		December 28, 2010
<hr style="border-top: 1px solid black; margin-bottom: 2px;"/> Keiko K. Takagi <hr style="border-top: 1px solid black; margin-bottom: 2px;"/> Typed or printed name		Date (202) 293-7060 Telephone Number
Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of <u>1</u> form is submitted.		